



-7 JUN 2019

## Representations on a Current Application for a Grant/Variation/Review of a Premises Licence or Club Premises Certificate under The Licensing Act 2003

Before completing this form please read the Guidance Notes at the end of the form. If you are completing this form by hand please write legibly in block capitals. In all cases ensure that your answers are inside the boxes and written in black ink. Use additional sheets if necessary. You may wish to keep a copy of the completed form for your records.

~~I/we~~ (Insert name)..... RICHARD NIELSEN.....wish to make representation in relation to an application that has been made in respect of the premises described in Part 1 below.

### PART 1 – PREMISES OR CLUB PREMISES DETAILS

Postal Address of Premises or Club Premises, or if none, ordnance survey map reference or description <u>THE MOORINGS, 14 BRIDGE STREET, BARRON WAY SOAR</u>	
Post Town <u>LOUGHBOROUGH</u>	Post Code <u>LE12 8PN</u>

Name of premises licence holder or club holding club premises certificate (if known)
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Number of premises licence or club premise certificate (if known)
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### PART 2 – DETAILS OF PERSON MAKING REPRESENTATION

- |  |                                     |
|--|-------------------------------------|
|  | Please Tick ✓                       |
| 1) A responsible authority (please complete (C) below)                                   | <input type="checkbox"/>            |
| 2) A member of the club to which this representation relates (please complete (A) below) | <input type="checkbox"/>            |
| 3) Other persons (Please complete (A) or (B) below)                                      | <input checked="" type="checkbox"/> |

**(A) DETAILS OF INDIVIDUAL MAKING REPRESENTATION (fill in as applicable)**

Mr  Mrs  Miss  Ms  Other Title (for example, Re )

Surname

First Names

I am 18 years old or over

Yes  (Please Tick)

Current Address	<input type="text" value="14 CROSSLEY CLOSE,&lt;br/&gt;BARLOW UPON SOAR&lt;br/&gt;Loughborough"/>		
Post Town	<input type="text"/>	Post Code	<input type="text" value="LE12 8QL"/>

Daytime contact telephone number

E-mail address (optional)

**(B) DETAILS OF OTHER PARTY MAKING REPRESENTATION (e.g Body or Business)**

Name and Address	<input type="text"/>
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Telephone Number (If any)	<input type="text"/>
E-Mail address (optional)	<input type="text"/>

**(C) DETAILS OF RESPONSIBLE AUTHORITY MAKING REPRESENTATION**

Name and Address	<input type="text"/>
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Telephone Number (If any)	<input type="text"/>
E-Mail address (optional)	<input type="text"/>

This representation relates to the following licensing objective(s)

Please Tick ✓

- |   |                                     |
|---|-------------------------------------|
| 1. The Prevention of Crime and Disorder | <input checked="" type="checkbox"/> |
| 2. Public Safety                        | <input type="checkbox"/>            |
| 3. The Prevention of Public Nuisance    | <input checked="" type="checkbox"/> |
| 4. The Protection of Children from Harm | <input type="checkbox"/>            |

Please state the ground(s) for representation (please read guidance note 1)

<p><b>The Prevention of Crime and Disorder</b></p> <p>LICENSING HOURS NOT ACCEPTABLE IN A RESIDENTIAL AREA, AT CLOSING TIME IT CAN BECOME NOISY WITH ANTI-SOCIAL BEHAVIOUR.</p>
<p><b>Public Safety</b></p>
<p><b>The Prevention of Public Nuisance</b></p> <ul style="list-style-type: none"><li>• THE LICENSE FOR OUTDOOR MUSIC IS FOR 7 DAYS A WEEK DURING THE 5 SUMMER MONTHS WITH NO RESTRICTIONS ON THE NUMBER OF DAYS MUSIC IS ALLOWED OR VOLUME OF THE MUSIC</li><li>• LICENSE FOR OUTDOOR REFRESHMENT IS FOR 7 DAYS A WEEK ALL YEAR ROUND WITH SAME LICENSING HOURS</li></ul>
<p><b>The Protection of Children from Harm</b></p>

Please provide as much information as possible to support the representation

(Please read guidance note 2)

• UNDER PREVIOUS OWNERS OF THE PUBLIC HOUSE DURING THE SUMMER MONTHS EVERY WEEKEND WE EXPERIENCED EXCESSIVE MUSIC, ANTI SOCIAL BEHAVIOUR LATE AT NIGHT, NOISE AND DISTURBANCE DURING CLOSING TIME WITH VEHICLE NOISES AND DRUNKEN BEHAVIOUR.

WITH THE INCREASE IN OPENING HOURS, NO RESTRICTIONS ON MUSIC WE CAN ONLY SEE THIS GETTING WORSE.

Please  
Tick ✓

Have you made any representation relating to these premises before?

If Yes, please state the date of that representation

Day		Month		Year			

**If you have made representation before relating to these premises please state what they were and when you made them.**

**Part 3 – Signatures** (Please read guidance note 3)

Signature of representative or representative's solicitor or other duly authorised agent. (See guidance note 4) If signing on behalf of the representative please state in what capacity.

Signature		Date	27.12.19
Capacity			

**Please Note – Your address will be a matter of public records if the application to which this representation relates is referred to the Licensing Committee to determine at a Hearing.**

Contact name (where not previously given) and address for correspondence associated with this representation. (Please read guidance note 5)	
Post Town	Post Code

Telephone Number (if any)	
E-mail Address (optional)	

**Notes for Guidance**

1. The ground(s) for representation **must** be based on one or more of the licensing objectives.
2. Please list any additional information or details for example dates of problems, which are included in the grounds for representation, if applicable.
3. The representation form must be signed.
4. A representative's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
5. This is the address which we shall use to correspond with you about this representation.
6. For further information about the Licensing Act 2003 please contact: The Licensing Section, Charnwood Borough Council, Southfield Road, Loughborough, Leicestershire, LE11 2TX. Tel: 01509 634562 Email: [Licensing@charnwood.gov.uk](mailto:Licensing@charnwood.gov.uk).

14 Crossley Close  
Barrow Upon Soar  
Loughborough  
Leicestershire  
LE12 8QL

21 MAY 2019

18<sup>th</sup> May 2019

Dear Licensing Manager

We are writing to express our objections about the recent License Application from the newly named pub "The Moorings" in Barrow upon Soar.

Having lived near the pub for 20 years we are aware of the implications that this can have on everyday life, however the licence that is now being applied for has the following items that we cannot tolerate.

- The Licensing hours being applied for are not acceptable in a residential area, closing time which is later than the Licensing hours are noisy and sometimes be a cause of anti-social behaviour. In our experience this means we will have disturbance until the early hours of the morning.
- The License for outdoor music is for 7 days a week during the full 5 summer months, with no restrictions on number of days music is allowed or the volume of the music.
- License for outdoor refreshment/drinks is for 7 days a week all year round with the same Licensing hours as the pub.

We are asking to reduce the Licencing hours, restrict the outdoor music to limited days, restrict the outdoors refreshments operating hours and have a defined volume limit on the outdoor music.

We have been in contact with other residents and they are of the same view, we have so far in excess of 25 signatures which are enclosed with this letter.

We look forward to your response

Kind Regards

Richard Wilson